What's in it for me?

Options. It's simple really. We're dedicated to helping you see clearly—and that's why we've built a network that gives you lots of choices and flexibility. You can choose from thousands of independent and retail providers to find the one that best fits your needs and schedule. No matter which one you choose, our plan is designed to be easy-to-use and help you access the care you need. Welcome to EyeMed.



Benefits Snapshot	With EyeMed	Out-of-Network Reimbursement
Exam with dilation as necessary (Once every 12 months)	\$10 Co-pay	Up to \$45
Frames (Once every 12 months)	\$0 Co-pay; \$170 allowance; 80% of charge over \$170	Up to \$70
Single Vision Lenses (Once every 12 months) Or	\$20 Co-pay	Up to \$45
Contacts (Once every 12 months)	\$0 Co-pay; \$150 allowance; plus balance over \$150	Up to \$105

And now it's time for the breakdown . . .

Here's an example of what you might pay for a pair of glasses with us vs. what you'd pay without vision coverage. So, let's say you get an eye exam and choose a frame that costs \$163 with single vision lenses that have UV and scratch protection. Now let's see the difference...

85%
SAVINGS
with us*

With	EyeMed	Withou	it Insurance**
Exam	\$10 Co-pay	Exam	\$106
Frame	\$163 -\$170 allowance \$0 -\$0.00 (20% discount off balance) \$0.00	Frame	\$163
Lens	\$20 Co-pay \$15 UV treatment add-on +\$15 Scratch coating add-on \$50	Lens	\$78 \$23 UV treatment add-on +\$25 Scratch coating add-on \$126
Total	\$60.00	Total	\$395



Download the EyeMed Members App

It's the easy way to view your ID card, see benefit details and find a provider near you.















JCPenney | optical



Additional discounts

40% Complete pair of prescription eyeglasses

20% Non-prescription

Non-prescription sunglasses

20% Remaining balance beyond plan coverage

These discounts are for in-network providers only

Take a sneak peek before enrolling

 You're on the INSIGHT Network

Frame

- For a complete list of in-network providers near you, use our Enhanced Provider Locator on www.eyemed.com or call 1-866-804-0982.
- For Lasik providers, call 1-877-5LASER6.

New Castle County - Option 2

Vision Care Services	In-Network Member Cost	Out-of-Network Reimbursement
Exam With Dilation as Necessary	\$10 Co-pay	Up to \$45
Retinal Imaging	Up to \$39	N/A
Frames	\$0 Co-pay; \$170 allowance; 80% of charge over \$170	Up to \$70
Standard Plastic Lenses		
Single Vision	\$20 Co-pay	Up to \$45
Bifocal	\$20 Co-pay	Up to \$65
Trifocal	\$20 Co-pay	Up to \$85
Standard Progressive Lens	\$70 Co-pay	Up to \$65
Premium Progressive Lens△	\$90 Co-pay - \$115 Co-pay	,
Tier 1	\$90 Co-pay	Up to \$65
Tier 2	\$100 Co-pay	Up to \$65
Tier 3	\$115 Co-pay	Up to \$65
Tier 4	\$70 co-pay, 80% of charge less \$120 Allowance	Up to \$65
Lenticular	\$20 Co-pay	Up to \$85
		op to 300
Lens Options (paid by the member and added to the bo UV Treatment		N1 / A
Tint (Solid and Gradient)	\$15 \$15	N/A
		N/A
Standard Plastic Scratch Coating	\$15	N/A
Standard Polycarbonate	\$40	N/A
Ståndard Polycarbonate – Kids under 19	\$0	Up to \$5
Standard Anti-Reflective Coating	\$45	N/A
Premium Anti-Reflective Coating△	\$57 - \$68	N/A
Tier 1	\$57	N/A
Tier 2	\$68	N/A
Tier 3	80% of charge	N/A
Photochromic/Transitions	\$75	N/A
Polarized	20% off retail price	N/A
Other Add-Ons and Services	20% off retail price	N/A
Contact Lens Fit and Follow-Up (Contact lens fi	t and two follow up visits are available once a comprehensive eye exam has been co	mpleted)
Standard Contact Lens Fit & Follow-Up	Up to \$55	N/A
Premium Contact Lens Fit & Follow-Up	10% off retail	N/A
Contact Lenses		
Conventional	\$0 Co-pay; \$150 allowance; 15% off balance over \$150	Up to \$105
Disposable	\$0 Co-pay; \$150 allowance; plus balance over \$150	
Medically Necessary	\$0 Co-pay, Paid-in-Full	Up to \$105
· •	40 00 pay, raid iiri dii	Up to \$210
Laser Vision Correction Lasik or PRK from U.S. Laser Network	15% off the retail price or 5% off the promotional price	N/A
Frequency	·	
Examination	Once every 12 months	
Lenses or Contact Lenses	Once every 12 months	
Eerises of Cortact Lerises	Office every 12 months	

Once every 12 months

APremium progressives and premium anti-reflective designations are subject to annual review by EyeMed's Medical Director and are subject to change based on market conditions. Fixed pricing is reflective of brands at the listed product level. All providers are not required to carry all brands at all levels. Benefits are not provided from services or materials arising from: 1) Orthoptic or vision training, subnormal vision aids and any associated supplemental testing; Aniseikonic lenses; 2) Medical and/or surgical treatment of the eye, eyes or supporting structures; 3) Any eye or Vision Examination, or any corrective eyewear required by a Policyholder as a condition of employment; Safety eyewear; 4) Services provided as a result of any Workers' Compensation law, or similar legislation, or required by any governmental agency or program whether federal, state or subdivisions thereof; 5) Plano non-prescription) lenses; 6) Non-prescription sunglasses; 7) Two pair of glasses in lieu of bifocals; 8) Services or materials provided by any other group benefit plan providing vision care 9) Services rendered after the date an Insured Person cases to be covered undor the Policy, oxcept when Vision Materials ordered before coverage ended are delivered, until the services rendered to the Insured Person are within 31 days from the date of such order: 10) Lost or broken lonses, framos, glasses, or contact lenses will not be replaced except in the next Benefit Frequency when Vision Materials would next become available. Benefits may not be combined with any discount, promotional offering, or other group benefit plans. Standard/Premium Progressive lens not covered-fund as a Bifocal lens. Standard Progressive lens covered-fund Premium Progressive as a Standard. Underwritten by Combined Insurance Company of America, 5050 Broadway, Chicago, IL 60640, except in New York. CICA Form # VN P63007 0801. The Certificate of Insurance is on file with your employer. Benefit allowance provides no remaining balance for future use within the same

AH2015



We've got you covered



eyemed.com

We understand, everybody is different, so if you prefer an independent doctor or a retail provider with extended evening and weekend hours, there's an option for you. We've built a network to give our members choices. So many choices that we can't fit them all on this page, so visit eyemed.com or scan the QR code with your smartphone to search our complete list of participating providers.

Locations near 19720 for the InSight network

LENSCRAFTERS 4514 KIRKWOOD HWY WILMINGTON, DE 19808 302-998-0484

TARGET OPTICAL 1900 DEPTFORD CENTER RD WOODBURY, NJ 08096 856-401-9453

JCPENNEY OPTICAL CHRISTIANA MALL 606 CHRISTIANA MALL RT 7 AND I 95 NEWARK, DE 19702 302-368-5054

PEARLE VISION 100 EVERGREEN DR STE 117 GLEN MILLS, PA 19342 610-558-9803

SEARS OPTICAL PRICES CORNER MALL 3240 KIRKWOOD HWY WILMINGTON, DE 19808 302-995-9351

LENSCRAFTERS CHRISTIANA MALL 709 CHRISTIANA MALL NEWARK, DE 19702 302-456-5850

SEARS OPTICAL CONCORD MALL 4737 CONCORD PIKE WILMINGTON, DE 19803 302-477-3460

LENSCRAFTERS CONCORD MALL 4737 CONCORD PIKE STE 110 WILMINGTON, DE 19803 302-479-0011

SEARS OPTICAL GRANITE RUN MALL 1067 W BALTIMORE PIKE MEDIA, PA 19063 610-565-3416

JCPENNEY OPTICAL 1067 W BALTIMORE PIKE MEDIA, PA 19063 610-565-9564 KAREN OPTICAL CO. 106 PENN MART SHOPPING CTR NEW CASTLE, DE 19720 302-322-4658

EPSTEIN EYE ASSOCIATES 169 CHRISTIANA RD NEW CASTLE, DE 19720 302-322-4444

THERESA FLEMING OD PC 101 N BROADWAY PENNSVILLE, NJ 08070 856-678-2288

JOHN B CUDLIPP OD 681 S BROADWAY PENNSVILLE, NJ 08070 856-935-3937

JOSEPH G GOLDBERG OD 801 E NEWPORT PIKE WILMINGTON, DE 19804 302-999-1286

OAKLEY CHRISTIANA MALL 138 CHRISTIANA MALL STE 1454 NEWARK, DE 19702 302-731-1892

WILMINGTON OPTICAL 616 N MARKET ST WILMINGTON, DE 19801 302-654-0530

SPECS FOR LESS 811 N MARKET ST STE A WILMINGTON, DE 19801 302-654-1466

DELAWARE OPHTHALMOLOGY CO 1941 LIMESTONE RD STE 120 WILMINGTON, DE 19808 302-479-3937

STEFAN S O'CONNOR MD 2055 LIMESTONE RD STE 103 WILMINGTON, DE 19808 302-992-0238

ADVANCED EYE CARE PA 213 GREENHILL AVE WILMINGTON, DE 19805 302-656-8867

HALPERN EYE ASSOCIATES 4605 KIRKWOOD HWY STE A WILMINGTON, DE 19808 302-734-5861 DELWARE VISION ACADEMY 3105 LIMESTONE RD STE 102 WILMINGTON, DE 19808 302-998-1395

SPECS FOR LESS 4520 KIRKWOOD HWY WILMINGTON, DE 19808 302-998-5001

SIMON EYE ASSOC 912 N UNION ST WILMINGTON, DE 19805 302-655-8180

KAREN OPTICAL 1207 N SCOTT ST STE 2 WILMINGTON, DE 19806 302-428-9900

DR RONALD S POGACH OD 5503 KIRKWOOD HWY WILMINGTON, DE 19808 302-994-3300

ALLAN TOCKER & ASSOC 5151 W WOODMILL DR STE 19 WILMINGTON, DE 19808 302-995-9060

DOUGLAS C DEMELLO OD & ASSO 1601 DELAWARE AVE STE 2C TROLLEY SQ WILMINGTON, DE 19806 302-652-5400

DELAWARE EYE CARE CTR 1721 PULASKI HWY BEAR, DE 19701 302-836-5410

HALPERN EYE ASSOC 1237 QUINTILIO DR GOVENORS SQUARE PLAZA 2 BEAR, DE 19701 302-838-0800

DOUGLAS J LAVENBURG 1 CENTURIAN DR STE 114 NEWARK, DE 19713 302-993-0722

MICHAEL BROSMAN MD LLC 2600 GLASGOW AVE STE 106 NEWARK, DE 19702 302-655-3321 BOSCOVS OPTICAL 361 W MAIN ST CHRISTIANA, DE 19702 302-738-4098

BRANDYWINE EYE CENTER 2600 GLASGOW AVE STE 206 NEWARK, DE 19702 302-832-0700

SIMON EYE ASSOCIATES 4001 KENNETT PIKE STE 128 WILMINGTON, DE 19807 302-239-1933

SIMON EYE ASSOCIATES 116 FOX HUNT DR # 118 BEAR, DE 19701 302-832-1500

KAREN OPTICAL 4750 LIMESTONE RD PIKE CREEK SHOP CTR WILMINGTON, DE 19808 302-998-0551

VISION CENTER OF DELAWARE 317 E MAIN ST NEWARK, DE 19711 302-737-5777

DELEWARE EYE CARE 333 E MAIN ST NEWARK, DE 19711 302-368-9105

HOWARD B STROMWASSER OD 210 SUBURBAN DR NEWARK, DE 19711 302-368-4424

EYEWORKS AT FAIRFAX FAIRFAX SHPG CTR 2205 CONCORD PIKE WILMINGTON, DE 19803 302-655-1952

SIMON EYE ASSOCIATES 5301 LIMESTONE RD STE 128 WILMINGTON, DE 19808 302-239-1933

BOSCOVS OPTICAL 4737 CONCORD PIKE WILMINGTON, DE 19803 302-478-5393

Eye exams offered by DPA/DTA or DEA-certified optometrists and ophthamologists. All certifications are verified by and NCQA-accredited credentials verification organization.































